Name in Full

Certificate of Death

Arrington

Died at Town: Near Hennyton County: Carroll MARYLAND

Date 1899 Month: May Day: 23	Age Y.: 1/2 M.: hour D.:	Native of: Md	Occupation: —

~~Male~~ / Female

White / ~~Colored~~

~~Married~~ / ~~Single~~ / ~~Widow~~ / ~~Widower~~ / Divorced

Number of children living none

~~Husband~~ / Wife of

Father's Name: Alfred arrington

Mother's Name: Stella arrington

Cause of Death — Primary: Heart Malformation — How long sick: few minutes

Immediate: Syncope 137

~~Accident, Suicide, Homicide~~

Reported by: Paul B. Strecher

Address: Sykesville Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 79706

Name In Full

Certificate of Death

William Albert Barnes

Died at Sykesville (Town) Carroll (County) MARYLAND

Date 1899 Month May Day 9 | Age Y. 31 M. D. | Native of Md. | Occupation Foundryman

Male ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ | Number of children living 3

Husband of Wife Laura Barnes

Father's Name Joshua Barnes | Mother's Name Catharine A. Barnes

Cause of Death — Primary: Tuberculosis Pulmonary 22a | How long sick 5 mos.

Immediate: Pulmonary Hemorrhage Int. | ~~Accident, Suicide, Homicide~~

Reported by Dr. Frank. Lucas M.D.

Address Sykesville, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 798PR

Name in Full

Certificate of Death

Mrs. Mary Beard

Died at — Town: near New Windsor — County: Carroll — MARYLAND

Date 189 9 — Month: 5 — Day: 4 — Age: Y. 85 M. D. — Native of — Occupation

~~Male~~ Female — White Colored — ~~Married~~ ~~Single~~ — Widow ~~Widower~~ — ~~Divorced~~ — Number of children living 7

Husband / Wife of John Beard

Father's Name — Mother's Name

Cause of Death — Primary: 161 — How long sick

Immediate — Accident, Suicide, Homicide

Reported by Carroll Record 5-20

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Name in Full

Certificate of Death

Edna Bowman

Died at Town: Silver Run County: Carroll Co MARYLAND

Date 189 Month: May Day: 3 | Age Y.: 1 M.: 1 D.: 5 | Native of: Maryland | Occupation:

~~Male~~ Female | ~~White~~ ~~Colored~~ | ~~Married~~ ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ ~~Number of children living~~

~~Husband~~ ~~Wife~~ of

Father's Name: George Bowman

Mother's Name: Maggie Houtz

Cause of Death — Primary: Measles 5— How long sick: 10 Days

Immediate: Bronchial Pneumonia ~~Accident, Suicide, Homicide~~

Reported by: Dr J. J. Stewart

Address:

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79708

Name in Full

Certificate of Death

Nevin Roy Bowman

Town: Silver Run County: Carroll

Died at Silver Run Carroll MARYLAND

Date 1894 Month May Day 14 Age Y. 24 M. D. Native of Carroll ~~Occupation~~

Male ~~Female~~ White ~~Colored~~ ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~ ~~Number of children living~~

Husband / Wife of

Father's Name George W. Bowman Mother's Name Mary Bowman

Cause of Death: Primary 1380

Immediate Insanition

How long sick Two weeks

Accident, Suicide, Homicide

Reported by Dr Joseph J Stuart

Address Union Mills

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 79706

Name in Full

Ger. Brown

Certificate of Death

Died at Town near Millers County Carroll MARYLAND

Date 189 Month 5 Day 18 | Age Y. 23 M. D. | Native of | Occupation

Male / Female | White / Colored | Married / Single | Widow / Widower | Divorced / Number of children living

Husband of
Wife

Father's Name | Mother's Name

Cause of Death — Primary 161 | How long sick

Immediate | Accident, Suicide, Homicide

Reported by Enterprise 5-19

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70808

Name in Full

Mrs Matilda Caltrider

Certificate of Death

Died at Town: Fairfield County: Carroll MARYLAND

Date 1899 Month: May Day: 30 | Age Y. 79 M. D. | Native of md | Occupation Housekeeper

~~Male~~ Female | White ~~Colored~~ | Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ | Number of children living 1.

~~Husband~~ Wife of Daniel Caltrider

Father's Name Jacob Fitz | Mother's Name Mary Fitz

Cause of Death: Primary Paralysis | How long sick 1 week

Immediate | Accident, Suicide, Homicide

OVER

Reported by James. M. Stones

Address Freemansburg Md.

OVER

Must be signed by physician, if any in attendance, otherwise ~~by coroner~~, undertaker or ~~minister~~.

LIBRARY BUREAU. 79898

Attended by Dr. Rinehart

of Foyzelburg

Seen by Coroner _____

Information contained in this certificate received from Jas. M Shaw

of _____

Name in Full — Certificate of Death

Francis H. Coulson

Died at — Town: Woodbine — County: Carroll — MARYLAND

Date 189 9 — Month: May — Day: 30 — Age: Y. 31 M. 4 D. 24 — Native of: Md — Occupation:

Male / ~~Female~~ — White / ~~Colored~~ — Married / ~~Single~~ — ~~Widow~~ / ~~Widower~~ — ~~Divorced~~ — Number of children living: two

Husband / ~~Wife~~ of Emma Coulson

Father's Name: Wm. Coulson — Mother's Name: Margaret A. Coulson

Cause of Death — Primary: Tuberculosis 2 2 a — How long sick: two years

Immediate: of lungs — ~~Accident, Suicide, Homicide~~

Reported by: A. J. Crouch

Address: Winfield Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 68968

Name In Full

John T. Derr

Certificate of Death

Town / County

Died at Acona Hospital for the same by Reisterstown Carroll Co. - MARYLAND

Date 1899	Month	Day	Age	Y.	M.	D.	Native of	Occupation
	May	22nd		68	—	—	Md.	Shoemaker

Male / ~~Female~~ — White / ~~Colored~~ — Married / ~~Single~~ — ~~Widow~~ / ~~Widower~~ — ~~Divorced~~

Number of children living Not known

Husband / Wife of Mrs John T. Derr

Father's Name: Not known

Mother's Name: Not known

			How long sick
Cause of Death	Primary	Aortic Regurgitation	Death sudden
	Immediate	Syncope	~~Accident, Suicide, Homicide~~

Reported by Charles J. Carey M.D

Address Acona Hospital Reisterstown, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70898

Name in Full

Certificate of Death

John Jacob Freese

Died at Town: Union Mills County: Carroll MARYLAND

Date 1899 Month: May Day: 6th | Age Y. 67 M. 7 D. 15. | Native of Carroll | Occupation Farmer

Male ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ | Number of children living two

Husband / Wife of Eliza Myers Freese

Father's Name Jacob Freese | Mother's Name Rebecca Freese

Cause of Death — Primary: Enlarged Prostate 104 | How long sick 6 months

Immediate: Uremic Poisoning | ~~Accident, Suicide, Homicide~~

Reported by Dr J J Stuart

Address Union Mills Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70706

Name In Full

Certificate of Death

Dennis Howard Frizzell

Died at Town: Westminster County: Carroll MARYLAND

Date 1899 Month: May Day: 20 | Age Y.: 56 M.: – D.: – | Native of: Md | Occupation: Carpenter

Male ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ Widower ~~Divorced~~ | Number of children living 2

Husband of Wife: Catharine Arbaugh

Father's Name: Jesse Frizzell | Mother's Name: Catharine Logue

Cause of Death: Primary: Pneumonia | How long sick: 1 Week

Immediate | Accident, Suicide, Homicide

ONED

Reported by: Frank C Shaver Undertaker

Address: Westminster

OVER

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

M.D.

LIBRARY BUREAU, 70888

Attended by Dr. J H Ballingall

of Westminster

1914

Seen by Coroner

of

Information contained in this certificate received from

of

Name In Full

Certificate of Death

Mr. Jessie Geisman

Died at Town Westminster County Carroll MARYLAND

Date 189 9 Month 5 Day 1 | Y. M. D. Age 32 | Native of | Occupation

Male ~~Female~~ | White Colored | Married Single | Widow Widower | Divorced Number of children living

Husband of Wife

Father's Name Jeremiah Geisman Mother's Name

Cause of Death: Primary — Virulent typhoid fever — How long sick

Immediate — Accident, Suicide, Homicide

Reported by Enterprise 5-5:

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79858

Name In Full

Certificate of Death

Mrs. Susannah Gunnell

Died at Town near Greenmount County Carroll MARYLAND

Date 189 9 Month 5 Day 17 | Age Y. M. D. | Native of | Occupation

~~Male~~ Female | White Colored | Married ~~Single~~ | Widow Widower | Divorced | Number of children living

Husband of Wife

Father's Name Jacob Gunnell | Mother's Name

Cause of Death: Primary 161 | How long sick

Immediate | Accident, Suicide, Homicide

Reported by Enterprise 5-19

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79[illegible]R

Name in Full

Certificate of Death

Rebecca Handley

Died at Town: Fountain Valley County: Carroll MARYLAND

Date 1899 Month: May Day: 28 | Age Y. 68 M. 10 D. 13 | Native of Carroll Co. | Occupation Housewife

~~Male~~ Female | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ ~~Widower~~ | ~~Divorced~~

Number of children living 6

~~Husband~~ Wife of Levi H. Handley

Father's Name John Stonesifer | Mother's Name Catharine Little

Cause of Death: Primary Cephalalgia 42 | How long sick

Immediate Apoplexy | ~~Accident, Suicide, Homicide~~

Reported by Chas. R. Fout M. D.

Address Westminster Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 78706

Name In Full

Miss Emma Miller

Certificate of Death

Died in Town near Hoodsboro County Carroll MARYLAND

Date 189	Month	Day	Age Y.	M.	D.	Native of	Occupation
	5	7	63				

~~Male~~ Female | White ~~Colored~~ | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ ~~Number of children living~~

Husband of Wife

Father's Name John Miller

Mother's Name

Cause of Death: Primary 161 — How long sick

Immediate — Accident, Suicide, Homicide

Reported by Enterprise 5-12

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 7[illegible]

Name in Full

Certificate of Death

Milton A Lawyer

Town

County

Died at Bruceville, Carroll MARYLAND

Date 1899	Month May	Day 2	Y.	M.	D.	Age 57	Native of Md,	Occupation Physician

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ Widower ~~Divorced~~ ~~Number of~~ children living 1

Husband / Wife of Mary Lawyer,

Father's Name Samuel Lawyer Mother's Name

Cause of Death — Primary Apoplexy 42 How long sick

Immediate Uræ 6-23 Accident, Suicide, Homicide

Reported by Frank F. Shriver,

Address Union Bridge Md,

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79706

Attended by Dr. None

of

Seen by Coroner

of

Information contained in this certificate received from John W. Martin

of

Name In Full

Certificate of Death

Clinton Lynn

Died at Town: Linwood County: Carroll MARYLAND

Date 1899 Month: 3 Day: 2 | Age Y. 17 M. D. | Native of | Occupation

Male ~~Female~~ | White Colored | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ ~~Number of children living~~

Husband of

Wife

~~Father's~~ Name

~~Mother's~~ Name

Cause of Death: Primary 161

Immediate

~~How long sick~~

Accident, Suicide, Homicide

Reported by Carroll Record - * 5-6

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

Name In Full Mrs. Scott McAllister

Certificate of Death

Died at ~~at~~ near Town Uniontown County Carroll MARYLAND

Date 189 9 Month 5 Day 24 Age Y. M. D.

Native of

Occupation

~~Male~~ Female

White ~~Colored~~

~~Single~~ Married Widow Widower Divorced

Number of children living

Husband of Wife

Father's Name

Mother's Name

Cause of Death: Primary 161 — How long sick

Immediate — Accident, Suicide, Homicide

Reported by Carroll Rund

Address

May 27

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79803

Name in Full — Certificate of Death

Margret Elizabeth Tracy

Town: Carroll — County:

Died at — MARYLAND

Month	Day	Y.	M.	D.	Native of	Occupation
5	11	74	9	21	Germany	

Date 1899

~~Male~~ / Female — White / ~~Colored~~ — ~~Married~~ / ~~Single~~ / Widow / ~~Widower~~ — ~~Divorced~~ — Number of children living 2

~~Husband~~ / Wife of Augustus Tracy

~~Father's~~ / ~~Mother's~~ Name: Don't know / Don't know

Cause of Death — Primary: Stomach trouble 81 — How long sick: 18 month.

Immediate

~~Accident, Suicide~~, Homicide

Reported by Edward F. Groft.

Address Union Mills Carroll Co.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 68868

Name in Full

Certificate of Death

James McGray

Died at Town: Gist County: Carroll MARYLAND

Date 1899 Month: May Day: 17 | Age Y. 85 M. 1 D. 17 | Native of Maryland | Occupation Farmer

Male ~~Female~~ | ~~White~~ ~~Colored~~ | Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ | Number of children living 5

Husband / Wife of Annie Goodwin

Father's Name Patrick McGray | Mother's Name Catharine Shea.

Cause of Death — Primary: Cystitis 102 — How long sick 4 years

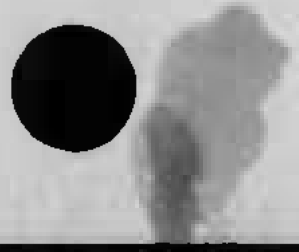
Immediate: Cystitis — Accident, Suicide, Homicide

Reported by L A Aldridge Physician

Address Long, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79708



Name In Full Wesley Myers

Certificate of Death

Died at Town New Windsor County Carroll MARYLAND

Date 189 9 Month 5 Day 24 Age 81 M. D. Native of Occupation

Male / ~~Female~~ White ~~Colored~~ Married Single Widow Widower Divorced Number of children living

Husband of
Wife

Father's Neme

Mother's Name

Cause of Death: Primary 161 — How long sick

Immediate — Accident, Suicide, Homicide

Reported by Carrol Reed

Address [redacted] May 27

Must be signed by physician, if any in attendance, otherwise by coroner, underteker or minister.

LIBRARY BUREAU. 70888

Name In Full

Miss Ida Christina Echs

Certificate of Death

Died at (Town) (County) Carroll MARYLAND

Date 189	Month	Day	Age	Y.	M.	D.	Native of	Occupation
	9.	4		9	7	21		

~~Male~~ Female | White | Colored | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ ~~Number of children living~~

Husband of
Wife

Father's Name

Mother's Name Mrs. Elizabeth Echs.

Cause of Death: Primary — diphtheria 8 a

How long sick

Immediate

Accident, Suicide, Homicide

Reported by Enterprise 5-5

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 76758

Rev. W. P. Savage, St. Johns M. E. Church.

Name In Full Frederick Norman Ohler — Certificate of Death

Died at near Town Taneytown — County Carroll — MARYLAND

Date 189 9 — Month Oct — Day 27 — Age Y. 5 M. 6 D. 29 — Native of — Occupation

Male / ~~Female~~ — White / ~~Colored~~ — ~~Married~~ / Single — ~~Widow~~ / ~~Widower~~ — ~~Divorced~~ / Number of children living

Husband / Wife of

Father's Name David Ohler — Mother's Name Amanda V. Ohler

Cause of Death — Primary 161 — How long sick

Immediate — Accident, Suicide, Homicide

Reported by Carroll Reed

Address 6-13

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 78888

Name in Full — Certificate of Death

Andrew Snyder

Died at Town: Miller's Station — County: Carroll — MARYLAND

Date 1899 — Month: 5-27 — Age: Y. 74 M. 4 D. 15 — Native of: Germany — Occupation:

Male ~~Female~~ — White ~~Colored~~ — Married ~~Single~~ — Widow — Widower — Divorced — Number of children living: 3

Husband of
Wife

Father's Name:

Mother's Name:

Cause of Death — Primary: Apoplexy 42 — How long sick:

Immediate: — Accident, Suicide, Homicide:

Reported by Samuel Eyler Snyder

Address Jmesville

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 79

Name in Full — Certificate of Death

Mark E. Starner

Died at Town: Deep Run — County: Carroll — MARYLAND

Data 1899 — Month: 5 — Day: 3 — Age: Y. 3 M. 9 D. — Native of: Md. — ~~Occupation~~

Male / ~~Female~~ — White / ~~Colored~~ — ~~Married~~ / Single — Widow / ~~Widower~~ — ~~Divorced~~ — Number of children living

~~Husband~~ / ~~Wife~~ of Harvey

Father's Name: Howard Starner — Mother's Name: Annie Starner

Cause of Death — Primary: Sudden death — How long sick: 1

Immediate — 167

~~Accident~~, ~~Suicide~~, ~~Homicide~~

Reported by: Edward F. Groft

Address: Union Mills Carroll Co.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, FORM

Name In Full

Goldie A. Steele

Certificate of Death

Died at Westminster (Town) Carroll (County) MARYLAND

Date 189 9 | Month May | Day 27 | Age Y. 16 M. — D. — | Native of Maryland | Occupation —

~~Male~~ / Female | White / ~~Colored~~ | ~~Married~~ / Single | ~~Widow~~ / ~~Widower~~ | ~~Divorced~~ / ~~Number of children living~~

Husband of
Wife

Father's Name J. Wesley Steele

Mother's Name Elizabeth Crouthoff

Cause of Death — Primery: Typhoid fever — How long sick

Immediate: —

OVER

Accident, Suicide, Homicide

Reported by Frank C Shaum undertaker

Address Westminster Md

OVER

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70018

Attended by Dr. L. L. Shipley

of Westminster Md

Seen by Coroner

of

Information contained in this certificate received from

of

Name in Full Miss Eliza Bordo

Certificate of Death

Died at Town Union Bridge County Carroll MARYLAND

Date 189 9 Month 0 Day 23 Age Y. 87 M. D. Native of Occupation

~~Male~~ Female White ~~Colored~~ Married ~~Single~~ Widow Widower Divorced Number of children living

Husband of Wife

Father's Name

Mother's Name

Cause of Death: Primary 161 — How long sick

Immediate — Accident, Suicide, Homicide

Reported by American Sentinel

Address [redacted] May 27

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79808

Name In Full Mary Ann Young

Certificate of Death

Died at Sykesville (Town) Carroll (County) MARYLAND

Date 1899 Month May Day 16 | Age Y. 62 M. 11 D. 2 | Native of Tres Cruz Mexico | Occupation Lady of Means

~~Male~~ Female | White ~~Colored~~ | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ ~~Number of children~~ living

~~Husband~~ Wife of

Father's Name John Young

Mother's Name Augustina Orsanley

Cause of Death: Primary Paralysis 42 — How long sick

Immediate Cerebral Hemorrhage — Accident, Suicide, Homicide

Reported by C. H. Hoffinger Jr.

Address Sykesville, Md.

Must be signed by physician, if any in attendance, otherwise by ~~coroner~~, undertaker or minister.

LIBRARY BUREAU, 75P6B